The U.S. Department of Education has established regulations to prevent fraud and abuse in the Federal Pell Grant Program by identifying students with unusual enrollment histories. Some students who have an unusual enrollment history do have legitimate reasons for their enrollment at multiple institutions. Such an enrollment history requires a review to determine whether there are valid reasons for the unusual enrollment history. This must be resolved before you will receive financial aid.

Please Note:
- Appeals submitted without sufficient supporting documentation will be denied without an option to resubmit.
- DO NOT include original records, they will not be returned. Do ensure all copies are legible.
- We recommend you keep copies of all paperwork.

A. Student Information

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>M.I.</th>
<th>Student ID #</th>
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Mailing Address (Including City, State and Zip)

B. Enrollment Information

Access the National Student Loan Data System (NSLDS) at www.nslds.ed.gov to assist you in filling out the following information. List all information for the 2015-16, 2016-17, 2017-18, and 2018-19 academic years. You must provide unofficial academic transcripts from all schools attended. Forms submitted without transcripts are not able to be processed.

<table>
<thead>
<tr>
<th>Institution</th>
<th>Dates of Attendance</th>
<th>Credit Hours Earned?</th>
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</thead>
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State College of Florida, Manatee-Sarasota does not discriminate on the basis of sex, race, religion, age, national origin/ethnicity, color, marital status, disability, genetic information and sexual orientation in any of its educational programs, services or activities, including admission and employment. Direct inquiries regarding nondiscrimination policies to: Equity Officer, 941-752-5323, PO Box 1849, Bradenton, FL 34206
C. Student Information

If you answered “No” to the Credit Hours Earned question for any of the schools you attended in 2015-16, 2016-17, and 2017-18 and 2018-19 you must provide an explanation of your failure to earn academic credit and provide third party documentation to support your explanation.

1. I am providing the required typed, signed, detailed explanation of how extenuating circumstances beyond your control prevented you from earning academic credit.

Acceptable Documentation may include, but is not limited to:

- Death of an immediate family member (you must include the relationship of the family member and a copy of the death certificate)
- Documented hospitalization or illness of self, child or parent (must include dates and a health care provider’s decision of the student’s readiness to return to school - written on official letterhead)
- Military obligations (must include documentation from commanding officer)
- Victim of a crime or unexpected disaster (must include copy of police report, third-party letters, etc.)
- Other (must include appropriate documentation): ________________________________

2. I am providing copies of Unofficial Transcripts for all institutions in which I have earned credits listed in Section B of this form

D. Certification and Signature

I certify that all information provided is true and correct to the best of my knowledge. I have included all pertinent documentation and understand if my petition is incomplete, it will be denied. I further understand that all decisions are final and cannot be appealed.

____________________________________________  ______________________
Student’s Signature      Date
**PETITION FOR UNUSUAL ENROLLMENT HISTORY Checklist**

Must be completed before sent for processing.

- [ ] FAFSA on file
- [ ] Petition is signed and dated
- [ ] Signed statement is included
- [ ] Student included third party documents
- [ ] Unofficial transcripts
- [ ] NSLDS history attached
- [ ] Requirement added to RRAAREQ as pending

Comments:
__________________________________________________________________________________________________
__________________________________________________________________________________________________

***All documents must be included when you accept this from the student. If you accept petition that has incorrect or missing information it will be returned to you and you will be responsible for contacting the student to get the documents.***

Signature: ___________________________________________ Date: ___________________

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**FOR OFFICE USE ONLY:**

**Decision:**  
☐ Approved  ☐ Denied

Comments: _______________________________________________________________ ___________________________________
__________________________________________________________________________________________________

Reviewed by: ________________________________ Date: _____________

Reviewed by: ________________________________ Date: _____________

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*State College of Florida, Office of Financial Aid Services  5840 26th Street West, Bradenton, FL 34207*  
* (Phone) 941.752.5037  (Fax) 941.727.6179  Email: AskFinAid@SCF.edu  Web: www.SCF.edu*  
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